MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

APPLICANT(S)

10/584321

FILING DATE

(FOR USE WITH FORM PTO-875)

CLAIMS

	AS FILED		AFTER		AFTER 2 **AMENDMENT	
	IND.			1" AMENDMENT		
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		with the following of				SHEST PRODUCTS

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TOTAL CLAIMS	0	U.S. DEPAR	0	(-a.ye	0	5275

PTO - 1360 (REV. 04/2007)

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